

ISSUE SLIP STAPLE AREA. (for optional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.H.		11/8/40
O.I.P.E. CLASSIFIER		7	11-15-49
FORMALITY REVIEW	EW	64974	12-2-89

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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